Ken 1107

FORNIA LIQUID WASTE HAULER RECORD STATE WATER RESOURCES CONTROL BOARD PRODUCER OF LIQUID WASTE Pick up Address (Street) (Number) Type of process (Exemples: metal plating, equipment cleaning, chemical formulation, etc.) I certify that the described waste was delivered to the licensed hauler named below for legal disposal at the site indicated -CIATE Signature of Producer or Authorized Agent and Title HAULER ASBURY OIL COMPANY Name (print or type) 13419 Halldale Ave. Gardena, Calif. 90249 **Business Address** (Street) (Number) certify that the described waste was hauled by me in a vehicle with a valid liquid waste hauler registration certificate to the disposal facility named below and was accepted State Waste Hauler's Registration No.: Lecal Business License Truck Tag No. (if applicable): DISPOSAL FACILITY certify that the hauler above delivered the described liquid waste to this disposal facility and it was an acceptable material under the-terms of the RWQCB Discharge Requirements and local regulations icate identification code for the manner and location of Group 1 Waste Disposal at the Facility. (The listing of Montification code is only required for Group 1 Waste Disposal. Instructions on how to specify | and Class ||-| disposal site in California.) Spreading IF WASTE IS HELD FOR DISPOSAL ELSEWHERE SPECIFY FMAL LOCATION Waste Disposal Facility Operator or PAILURE TO MAINTAIN RECORDS AS REQUIRED BY SECTION 2440 OF CHAPTER 3, TITLE 23

OF THE CALIFORNIA ADMINISTRATIVE CODE, MAY RESULT IN REVOCATION OF REGISTRATION.
IN APPLICABLE AREAS OF LOS ANGELES COUNTY, THE ORIGINAL OF THIS CERTIFICATE